

10-02-00

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Atty. Dkt. No. 00AB147 (81696/235)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Gary Dan Dotson  
Title: PROGRAMMABLE ERROR  
CHECKING VALUE CIRCUIT AND  
METHOD  
Appl. No.: Unknown  
Filing Date: Unknown  
Examiner: Unknown  
Art Unit: Unknown

<b>CERTIFICATE OF EXPRESS MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, Washington, D.C. 20231.	
<b>EL564017095US</b>	<b>9/29/00</b>
(Express Mail Label Number)	(Date of Deposit)
<b>Karen M. Meier</b>	
(Printed Name)	
	
(Signature)	

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Commissioner for Patents  
Box NEW PATENT APPLICATION  
Washington, D.C. 20231

Dear Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Gary Dan Dotson

Enclosed are:

- ☒ [ X ] Specification, Claim(s), and Abstract (27 pages).
- ☒ [ X ] Informal drawings (8 sheets, Figures 1-8).
- ☒ [ X ] Declaration and Power of Attorney (2 pages).
- ☒ [ X ] Assignment of the invention to Rockwell Technologies, LLC. (2 pages).
- ☒ [ X ] Assignment Recordation Cover Sheet.
- ☐ [ ] Check in the amount of \$40.00 for Assignment recordation.
- ☐ [ ] Small Entity statement.
- ☐ [ ] Information Disclosure Statement.
- ☐ [ ] Form PTO-1449 with copies of \_\_\_ listed reference(s).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$690.00	\$690.00
Total Claims:	19	- 20	= 0	x \$18.00	= \$0.00
Independents:	3	- 3	= 0	x \$78.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$260.00	= \$0.00
				SUBTOTAL:	= \$690.00
[ ]				Small Entity Fees Apply (subtract ½ of above):	= \$0.00
				TOTAL FILING FEE:	= \$690.00

- [ X ] Please charge Deposit Account No. 01-0857 in the amount of \$690.00 to cover the filing fee.
- [ X ] Please charge Deposit Account No. 01-0857 in the amount of \$40.00 to cover the Assignment recordation fee.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 01-0857.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

*[Signature]* Reg. No. 39,282

Date 9/29/00

By on behalf of John Horn

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